APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

Title of Invention IMPROVED CATHETER BALLOON MOLD FORM AND MOLDING

PROCESS

Application Type:

regular, utility

Attorney Docket Number: S63.2-11346-US01

Correspondence address:

Customer Number:

490

490

Inventors Information:

Inventor 1:

Applicant Authority Type:

Inventor

Citizenship:

US

Given Name:

Ken

Middle Name:

Xiao Kang

Family Name:

Zhang

City of Residence:

Maple Grove

State of Residence:

MN

Country of Residence:

US

Address-1 of Mailing Address: 16688 73rd Avenue

Address-2 of Mailing Address:

City of Mailing Address:

Maple Grove

State of Mailing Address:

MN

Postal Code of Mailing Address: 55311

Country of Mailing Address:

US

Phone:

Fax:

E-mail:	
Inventor 2:	
Applicant Authority Type:	Inventor
Citizenship:	US
Given Name:	Jeffrey
Middle Name:	S.
Family Name:	Lindquist
City of Residence:	Maple Grove
State of Residence:	MN
Country of Residence:	US
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City of Mailing Address:	Maple Grove
State of Mailing Address:	MN
Postal Code of Mailing Address	: 55311
Country of Mailing Address:	US
Phone:	
Fax:	
E-mail:	
Inventor 3:	
Applicant Authority Type:	Inventor
Citizenship:	US
Given Name:	Victor
Middle Name:	L.
Family Name:	Schoenle
City of Residence:	Greenfield
State of Residence:	MN
Country of Residence:	US

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Address-2 of Mailing Address:	
City of Mailing Address:	Greenfield
State of Mailing Address:	MN
Postal Code of Mailing Address:	: 55357
Country of Mailing Address:	US
Phone:	
Fax:	
E-mail:	
Inventor 4:	
Applicant Authority Type:	Inventor
Citizenship:	US
Given Name:	Scott
Family Name:	Schewe
City of Residence:	Eden Prairie
State of Residence:	MN
Country of Residence:	US
Address-1 of Mailing Address:	6300 Duck Lane Rd
Address-2 of Mailing Address:	
City of Mailing Address:	Eden Prairie
State of Mailing Address:	MN
Postal Code of Mailing Address:	: 55346
Country of Mailing Address:	US
Phone:	
Fax:	
E-mail:	
Inventor 5:	
Applicant Authority Type:	Inventor
Citizenship:	US
Given Name:	David

Family Name: **Parsons** City of Residence: **Princeton** State of Residence: MN Country of Residence: US Address-1 of Mailing Address: 30621 147th Street Address-2 of Mailing Address: City of Mailing Address: Princeton State of Mailing Address: MN Postal Code of Mailing Address: 55371 Country of Mailing Address: US Phone: Fax: E-mail: Inventor 6: **Applicant Authority Type:** Inventor US Citizenship: Given Name: Nao Family Name: Lee City of Residence: Brooklyn Park State of Residence: MN Country of Residence: US Address-1 of Mailing Address: 2816 81st Avenue North Address-2 of Mailing Address: City of Mailing Address: **Brooklyn Park** State of Mailing Address: MN Postal Code of Mailing Address: 55444 Country of Mailing Address: US Phone: Fax:

E-mail:

Inventor 7:

Applicant Authority Type:

Inventor

Citizenship:

US

Given Name:

Ying

Family Name:

Xiong

City of Residence:

St. Paul

State of Residence:

MN

Country of Residence:

US

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Attorney Information:

Name	Registration Number
Mr. Walter J. Steinkraus	29592

Assignee 1:

Organization Name:

Scimed Life Systems, Inc.

Address-1 of Mailing Address: One Scimed Place

Address-2 of Mailing Address:

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Maple Grove

State of Mailing Address:

MN

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Country of Mailing Address:	US
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